Time: 12:12 PM To: @ 1.571.273.2885 NOV 0 1 2006

Comp

PART B - FEE(S) TRANSMITTAL

and send this form, together with applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

	CURRENT CURRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.			
÷	37287	7590 09/2	5/2006	hav				
- A-	ROETZEL & A 1375 EAST 9TH CLEVELAND, (I STREET OH 44114		I he Stat add tren	Certificat creby certify that this Feet tes Postal Service with su ressed to the Mail Stop smitted to the USPTO (5)	e of Mailing or Transm (s) Transmittal is being flicient postage for first ISSUE FEE address (71) 273-2885, on the da	nission deposited with the United t class mail in an envelope above, or being facsimilate indicated below.	
)1/2006	HDEMESSS 00000	049 500959 10/6	3535		Jennifer Safr		(Depositor's name)	
C:1501	1400.00	DA			184		(Signature)	
C:1504 C:8001					November 1,	2006	(Date)	
	APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
	10/763,535	01/23/2004		Edward L. Kowalski		109771.0219	9231	
TIT	LE OF INVENTION	: MATTRESS AND BE	EDDING PACKAGE W[]	'H FULL PERIMETER PF	ROTECTION AND HAN	DLING PIECE		
	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/26/2006	
	EXAM	INER	ART UNIT	CLASS-SUBCLASS]			
	FIDEI, I	DAVID	3728	206-326000	•			
CFK	C 1.363).		on of "Fee Address" (37	2. For printing on the p (1) the names of up to	3 registered patent attorn	Roetzel	& Andress	
E P	☐ "Fee Address" indi	Change of correspondence address (or Change of Correspondence ress form PTO/SB/122) attached. Fee Address" indication (or "Fee Address" Indication form /SB/47; Rev 03-02 or more recent) attached. Use of a Customer about 1s required.		or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
P	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed in recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
()	A) NAME OF ASSIG	INEE		(B) RESIDENCE: (CITY				
	Sealy	Technology LI	c	Trinity,	N.C.			
Picas	case check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖔 Corporation or other private group entity 🚨 Governmen							
	The following fee(s) a	re submitted;	4t	. Payment of Fee(s): (Plea	se first reapply any prev	dougly naid issue fee sh	hown shove)	
	Issuc Fee			A check is enclosed.				
X.	☐ Publication Fee (No ☐ Advance Order - #	o small entity discount p of Copies 3		Payment by credit can The Director is hereby overpayment, to Depor	d. Form PTO-2038 is atta authorized to charge the sit Account Number 50	required fee(s), any defi-	ciency, or credit any extra copy of this form).	
	a. Applicant claims	us (from status indicates SMALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL ENT	FITY status. See 37 CFF	R 1.27(e)(2).	
NOT intere	E: The Issue Fee and est as shown by the re	Publication Fee (if requeecords of the United Sta	uired) will not be accepted tes Patent and Trademark	from anyone other then the	ne applicant; a registered s	attorney or agent; or the	assignee or other party in	
	uthorized Signature				Date November	1, 2006		
Aı			Caall		Registration No3	5 351		
	yped or printed name	James C.	SCOLL			J 9 J J 1		
This of an ap subm this firm Box 1	collection of informate optication. Confidential titing the completed form and/or suggestio 1450, Alexandria, Virandria, Virginia 2231	tion is required by 37 C ality is governed by 35 application form to the ons for reducing this bur rginia 22313-1450. DC 3-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	n is required to obtain or re 1.14. This collection is esta- depending upon the indivi chief Information Officer COMPLETED FORMS TO pond to a collection of info	etain a benefit by the publ mated to take 12 minutes dual case. Any comment r, U.S. Pate-t and Tradem THIS ADDRESS. SENI	ic which is to file (and be to complete, including son the amount of time ark Office, U.S. Depart of TO: Commissioner for	gathering, preparing, and e you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,	



ROETZEL & ANDRESS A LEGAL PROFESSIONAL ASSOCIATION

FACSIMILE TRANSMISSION COVER SHEET

1375 EAST NINTH STREET ONE CLEVELAND CENTER NINTH FLOOR CLEVELAND, OH 44114 216.623.0150 MAIN 216.623.0134 FAX

DATE:	11/1/2006	PAGES (INCLUDING COVER PAGE): 3			
То:	ISSUE FEE PAYMENT	FAX: 1.571.273.2885			
From:	James C. Scott	Client Matter:	109771.0219		
,	We are transmitting from f	acsimile equipment which	will enternationly acres		

We are transmitting from facsimile equipment, which will automatically connect transmissions to Roetzel & Andress twenty-four hours a day. If problems arise during transmission, please contact the operator at the office number listed above. Thank you.

NOTE: Unless otherwise indicated, the information contained in this facsimile transmission is confidential information intended for the use of the individual or entity named above. The information contained in this transmission may also be attorney-client privileged and/or protected as attorney work product. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error or are not sure whether it is confidential or otherwise privileged, please immediately notify us by telephone, and return the original message to us at the above address via the U.S. Postal Service at our expense. Thank you.

COMMENTS:

Dear Sirs.

Please pay the attached Issue Fee payment.

301926.109771.0219

CLEVELAND

TOLEDO

AKRON

COLUMBUS

CINCINNATI

WASHINGTON, D.C.

TALLAHASSEE

FORT MYERS

NAPLES